U.S. Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND **EMPLOYEE REPORT**

Form approved
Office of Management
and Budget
No 1215 0188 Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

For Official Use Only Soul Fig. Rec d	
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For Officest Use Only Read THE INSTRUCTIONS CAREFU	JLLY BEFORE PREPARING THIS REPORT			
1 File Number U 9752	2 Fiscal Year Covered From			
	1 / 1 / 2004 Through 12 / 31 / 2004			
3 Name and address of person filing	4 Name file number and address of labor organization			
Mame John Ortquist	Name United Union of roofers 149 rdwa			
	Labor Organization File Number 0.35_129			
PO Box Bldg Room No If any	P O Box Building and Room Number if any			
Street 3242 W HObson	Street 1640 Porter			
City Flint	Crty Detriot			
State Michigan ZIP Code + 4 48504	State Michigan ZIP Code + 4 48216			
5 Position in labor organization				
(except as specified in the ex	pouse or minor child directly or indirectly had any of the following interests clusions set forth in the instructions) or derived income or other conomic benefit of			
monetary value from an employer whose imployees your organization. 6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income			
Name				
Trade Name of any				
PO Box Bldg Room No If any				
, o box blog room to wany	7 b Amount			
Street				
Crty				
State ZIP Code + 4				
Signature				
15 Signature and verification. The undersigned declares under penalty submitted in this report (including the information contained in any accompundersigned's knowledge and belief true correct and complete (See the	y of Perjury and other applicable penalties of the law that all of the information panying documents) has been examined by the signatory and is to the best of the exection on penalties in the in tructions)			
Signed Signed	On 8/0/06 (810) 687-1368 Date Telephone Number			

Name of Person Filing John Ortguist	<u> 4 </u>	File Number U				
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested						
8 Name and address of Business (including trade name if any)	9 Business deals with	5 °C C				
Name Roofers Local 149 Mid-michigan Joint Apprenticeship fund Trade Name fany N/A	X a Labor Organiz	ation				
PO Box, Bldg Room No if any P.O. Box 3039	b Trust					
Street 30700 Telegraph Road						
City Bingham Farms State Michigan ZIP Code + 4 48012						
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dea	ling				
Name United Union of Roofers local 149						
Trade Name if any						
PO Box Bldg Room No If any						
Street 1640 Porter	11 b Approximate dollar va	liue of such dealing				
City Detroit	12 a Nature of interest he	· 1				
State Michigan ZIP Code + 4 48216	attending a	expense of \$300 00 for Torch Certification icago in 2004				
	12 b Amount.	\$300.00				
C Received from any employer (other than an employer covered under	or nade A and B above)					
or from any labor relations consultant to an employer any payment of money	or other thing of value					
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment					
Name						
Trade Name If any						
P O Box Bldg Room No if any						
Street						
Crty						
State ZIP Code + 4						
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment					

Name of Person Filing	K.	File Number U-
John Ortquist	_ (1	# 45.850 #####
B Held an interest in or derived income or economic benefit with monetary valus substantial part of which consists of buying from selling or leasing to or otherwork an employer whose employees your labor organization represents or is active (2) any part of which consists of buying from or selling or leasing directly or individually with your labor organization or with a trust in which your labor organization.	ise dealing with the busines: ely seeking to represent, or rectly to or otherwise	
8 Name and address of Business (including trade name if any)	9 Business deals with	
Name Roofers Local 149 Mid-michigan Joint Apprenticeship fund Trade Name fany N/A PO Box, Bidg Room No if any P.O. Rox 3039 Street 30700 Telegraph Road City Bingham Farms State Michigan ZiP Code+4 48012	X a Labor Organiza b Trust c. Employer	ge stoon
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such deal	ing
Name United Union of Roofers local 149 Trade Name fany PO Box Bldg Room No fany Street 1640 Porter City Detroit State Michigan ZIP Code + 4 48216	apprenticesh	
	12 b Amount	\$ 16,952.51
C Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	er parts A and B above) or other thing of value	
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment	
Name		
Trade Name If any		
P O Box Bidg Room No If any Street City		
State ZIP Code + 4		
13 b Is the Business an Employer or Consultant 2	14 b Amount of payment	